

## EVENT WAIVERS

### Event Waiver Agreement

#### BRYN MAWR COLLEGE SOCCER CLINIC RELEASE

Releasees: 1) Bryn Mawr College, its agents and employees including Board of Trustees, Administration, Faculty, Staff, and Students.

Release: I release and give up all claims, including claims for negligence, I now have or may have in the future against Releasees arising out of my child's participation in the following activity:

I understand that this activity will be held at Bryn Mawr College. I understand that soccer is an inherently dangerous sport. I also understand that the activity set forth above is undertaken by my child on a completely voluntary basis. I make this decision by choice and my child's participation in this activity is undertaken knowing that risks may be involved. These risks include, but are not limited to, property loss or damage and physical or emotional injury, temporary or permanent, and death. I voluntarily and knowingly assume the risks of these dangers by choosing to have my child participate in the activity. I understand Releasees do not assume any risk or liability due to my child's participation in this activity. I understand this Release applies to all claims for property loss, injury or illness, or death or any other damages suffered by my child or me, now or in the future whether suffered in traveling to the activity or during the activity itself.

I also understand and agree that Bryn Mawr College will not have medical personnel available at the location of the activity. I understand and agree that Bryn Mawr College is granted permission to authorize emergency medical treatment for my child, if necessary, and that such action by Bryn Mawr College shall be subject to the terms of this Release. I understand and agree that Bryn Mawr College assumes no responsibility for any injury or damage which might arise out of or in connection with such authorized emergency medical treatment of my child.

I further agree that this Release shall be construed in accordance with the laws of the Commonwealth of Pennsylvania. If any term or provision of this Release shall be held illegal, unenforceable, or in conflict with any law governing this Release, the validity of the remaining portions shall not be affected thereby.

Binding: This Release binds me, my child, my heirs and personal representatives. I understand that it benefits the heirs, personal representatives or successors and assigns of Releasees.

Signing: Before signing my name to this Release, I state that:

- 1) I have read it,
- 2) I understand it and know that I am giving up important rights,
- 3) I intend to be legally bound by it.